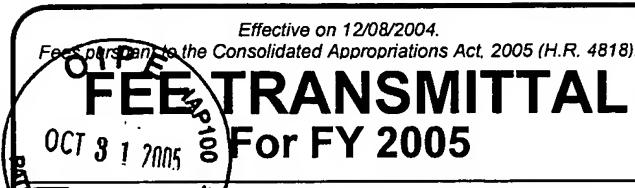


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Effective on 12/08/2004. <small>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		Complete if Known	
		Application Number	10/698,655
		Filing Date	10/31/2003
		First Named Inventor	Jai N. Subrahmanyam
		Examiner Name	David Donald Davis
		Art Unit	2652
TOTAL AMOUNT OF PAYMENT (\$)		180.00	
		Attorney Docket No.	K35A1397 / WSTDL-084A

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: 19-4330 Deposit Account Name: Stetina Brunda Garred & Brucker

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>	
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEESFee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=			
HP = highest number of total claims paid for, if greater than 20					

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	=			
HP = highest number of independent claims paid for, if greater than 3					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x		= 0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Supplemental Information Disclosure Statement

\$180.00

SUBMITTED BY

Signature	Eric L. Tanezaki	Registration No. (Attorney/Agent)	40,196	Telephone	(949) 855-1246
Name (Print/Type)	Eric L. Tanezaki			Date	10/28/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

OCT 31 2009

(Use as many sheets as necessary)

Sheet

1 of 1

<i>Complete if Known</i>	
Application Number	10/698,655
Filing Date	10/31/2003
First Named Inventor	Jai N. Subrahmanyam
Art Unit	2652
Examiner Name	David Donald Davis
Attorney Docket Number	K35A1397 / WSTDL-084A

U. S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

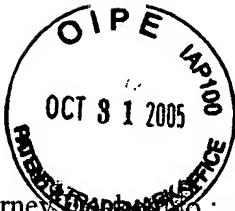
FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: K35A1397 / WSTDL-084A
Serial No.: 10/698,655



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Subrahmanyam) Confirmation No.: 3769
Serial No.: 10/698,655) Art Unit: 2652
Filing Date: 10/31/2003) Examiner: David Donald Davis
For: SLIDER WITH A SLIDER)
GROUND PAD)
ELECTRICALLY)
CONNECTED TO WRITE)
HEAD POLES AND READ)
HEAD SHIELDS)

)

INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. SECTION 1.97

Mail Stop AMENDMENT
Commissioner for Patents
Post Office Box 1450
Alexandria, Virginia 22313-1450

Dear Sir/Madam:

Pursuant to 37 C.F.R. § 1.97, the following Information Disclosure Statement is submitted as listed on form PTO/SB/08A enclosed herewith in duplicate.

No representation is made that the references disclosed herein legally constitute prior art, or that more relevant references are not available. The disclosure documents enclosed herewith and listed on the attached form (PTO/SB/08A) are submitted herein in the English language and/or accompanied by an Abstract published in the English language.

The references listed herein, when taken alone or in combination are not believed to disclose nor make obvious the invention as claimed in the subject application.

11/01/2005 SFELEKE1 00000036 10698655
01 FC:1806
180.00 OP

As this Information Disclosure Statement is after three months from the filing date of the subject application and/or after receipt of the initial Office Action, a filing fee check in the amount of \$180.00 is enclosed herein.

If any additional fee is required, please charge Account Number 19-4330.

Respectfully submitted,

Dated: 10/28/2005

Customer No. 007663

By: Eric L. Tanezaki
Eric L. Tanezaki
Registration No. 40,196
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